PTO/SB/01 (12-97)

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## Attorney Docket Number **DECLARATION FOR UTILITY OR** Ga-Läne Chen First Named Inventor **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) **Application Number** Filing Date ■ Declaration ☐ Declaration Submitted after Initial Filing (surcharge OR Submitted Group Art Unit with Initial (37 CFR 1.16 (e)) Filing **Examiner Name** required)

As a below named inventor, I hereby declare that:								
My residence, post office address, and citizenship are as stated below next to my name.								
I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:								
METHOD FOR PRODUCING LIGHT GUIDE PLATE AND MOLD FOR THE SAME								
the specification of which (Title of the Invention)  is attached hereto  OR								
	was filed on (MM/DD/YYYY) as United States Application Number or PCT International							
Application Number	Application Number and was amended on (MM/DD/YYYY) (if applicable).							
I hereby state that I have r	eviewed and understand the	contents of the above ident	ified specification	n, including the claims, as				
• •	disclose information which is		defined in 27 CE					
	and the state of t		demied m of O					
1 hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.								
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MWDD/YYYY)	Priority Not Claimed	Certifled Copy Attached? YES NO				
91137243	Taiwan	Dec/25/02	. مصم	***************************************				
Additional foreign application	ation numbers are listed on a	supplemental priority data	sheet PTO/SB/0	02B attached hereto:				
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:  I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.								
Application Number(s) Filing Date (MM/DD/YYYY)								
			Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.					
			<u> </u>					

[Page 1 of 2]
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PTO/S8/01 (12:97)

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## DECLARATION — Utility or Design Patent Application I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 36S(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filling date of the prior application and the national or PCT international filling date of this application. U.S. Parent Application or PCT Parent Parent Filing Date Parent Patent Number Number (MM/DD/YYYY) (if applicable) Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto. As a named inventor, 4-hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Paten and Trademark Office connected therewith: 🔀 Customer Number 25859 Place Customer OR Number Bar Code Registered practitioner(s) name/registration number listed below I abel here Registration Registration Name Number Number Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto. Direct all correspondence to: 😡 - Customer Number OR Correspondence address below 25859 or Bar Code Label Name Address Address City State Z:P Country Telephone Fax I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. A petition has been filed for this unsigned inventor Name of Sole or First Inventor: Given Name (first and middle (if anyl) Family Name or Surname -Tane Chen Inventor's Signature 12/10/03 Date Fremont CA U.S.A Residence: Cltv U.S.A. Country Citizenship 1650 Memorex Drive Post Office Address Post Office Address Santa Clara State 95050 ZIP Country U.S.A.

Additional inventors are being named on the 1 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto

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## **DECLARATION**

## ADDITIONAL INVENTOR(S) Supplemental Sheet Page \_1\_ of \_1

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor											
Given Name (first and middle [if any])					Family Name or Surname						
GCharles					Chen Leu						
Inventor's Signature	luan								ate .	12/10/0	
Residence: City	Fremont	Stat	CA		Country	U.S.A.		Citize	nship	U.S.A.	
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Post Office Address											
City	Santa Clara	Stat	e CA		ZIP	95050	Country	ט ע	U.S.A.		
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Given Name (first and middle [if any])				Family Name or Surname							
Inventor's Signature					Date						
Residence: City		State	State		ountry			Citizenship			
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Post Office Address										~ *	
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Name of Additional Joint Inventor, if any:											
Given Nar	Given Name (first and middle [if any]) Family Name or Surname										
	•									į	
Inventor's Signature									Date		
Residence: City		State			Country			Citizenship			
Post Office Address											
Post Office Address				<del></del>							
City	State				ZIP		Co	untry			

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